B1 (Official Form 1)(04/13)								
	United States Bankruptcy Court Northern District of Ohio					Voluntary	Petition	
Name of Debtor (if individual, enter Last, First, <b>Molina, Marilyn</b>	Middle):		Name	of Joint De	ebtor (Spouse	) (Last, First,	, Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):  AKA Marilyn Cummings	years				used by the J maiden, and		in the last 8 years ):	
Last from the last of Co. Co. and admitted Trans-	ID (ITIN)/C-	andre FIN	Lost fo	oum dinite o	f Coo Coo on	Individual 7	Гахрауег I.D. (ITIN) No	/Complete FIN
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-2161	yer 1.D. (111N)/Con	npiete EIN	(if more	than one, state	all)	marviduai-	raxpayer i.D. (111N) No	)./Complete EIN
Street Address of Debtor (No. and Street, City, a 1642 East 33rd Street Lorain, OH	nd State):		Street	Address of	Joint Debtor	(No. and Str	reet, City, and State):	
		ZIP Code <b>44055</b>						ZIP Code
County of Residence or of the Principal Place of Lorain	Business:		Count	y of Reside	ence or of the	Principal Pla	ace of Business:	
Mailing Address of Debtor (if different from stre	et address):		Mailin	g Address	of Joint Debt	or (if differen	nt from street address):	
		ZIP Code						ZIP Code
Location of Principal Assets of Business Debtor								
(if different from street address above):								
Type of Debtor (Form of Organization) (Check one box)		of Business			•	-	otcy Code Under Whice led (Check one box)	:h
<ul> <li>Individual (includes Joint Debtors)         See Exhibit D on page 2 of this form.</li> <li>□ Corporation (includes LLC and LLP)</li> <li>□ Partnership</li> <li>□ Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>	☐ Health Care Bu ☐ Single Asset R in 11 U.S.C. § ☐ Railroad ☐ Stockbroker ☐ Commodity Bu ☐ Clearing Bank	usiness Real Estate as ( 101 (51B) roker	defined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl	hapter 15 Petition for Ra a Foreign Main Procee hapter 15 Petition for Ra a Foreign Nonmain Pro	eding ecognition
Chapter 15 Debtors	Other						e of Debts	
Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		f the United Sta	tion tes	defined "incurr	are primarily co l in 11 U.S.C. § ed by an indivinal, family, or	nsumer debts, 101(8) as dual primarily	Debts busines	are primarily ess debts.
Filing Fee (Check one box  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's consideration debtor is unable to pay fee except in installments.	individuals only). Muson certifying that the	st Check if	ebtor is a sr ebtor is not : ebtor's aggr	a small busin	debtor as definess debtor as dentingent liquida	lefined in 11 U	C. § 101(51D).  J.S.C. § 101(51D).  Eluding debts owed to inside	
Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration.	7 individuals only). M	Check all A	ll applicable plan is bein ecceptances	e boxes:  ng filed with of the plan w	this petition.		on 4/01/16 and every thre	<u> </u>
Statistical/Administrative Information		ın	accordance	e with 11 U.S	S.C. § 1126(b).	THIS	SPACE IS FOR COURT	USE ONLY
☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt proper there will be no funds available for distributions.	erty is excluded and	l administrativ		es paid,				
1- 50- 100- 200-	1,000- 5,001- 5,000 10,000	10,001-	□ 25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	51,000,001 \$10,000,001 to \$50 million million	\$50,000,001 to \$100	\$100,000,001 to \$500 million					
\$0 to \$50,001 to \$100,001 to \$500,001	\$1,000,001 \$10,000,001 to \$50	\$50,000,001	\$100,000,001 to \$500	\$500,000,001 to \$1 billion	More than \$1 billion			

**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Molina, Marilyn (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Judge: Relationship: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Jeffrey H. Weir II August 21, 2015 Signature of Attorney for Debtor(s) (Date) Jeffrey H. Weir II (#0067470) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and П Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Voluntory Detition

Name of Debtor(s):

## **Voluntary Petition**

(This page must be completed and filed in every case)

## Signatures

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Marilyn Molina

Signature of Debtor Marilyn Molina

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 21, 2015

Date

#### Signature of Attorney\*

### X /s/ Jeffrey H. Weir II

Signature of Attorney for Debtor(s)

#### Jeffrey H. Weir II (#0067470)

Printed Name of Attorney for Debtor(s)

#### Jeffrey H. Weir II, Esq.

Firm Name

6145 Park Square Dr., Unit 1 - Box 2 Lorain, OH 44053

Address

# Email: jeffreyweirlaw@gmail.com

440-988-9013 Fax: 440-334-1936

Telephone Number

August 21, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Molina, Marilyn

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

-		

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Northern District of Ohio

In re	Marilyn Molina	Case No.		
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am r	not required to receive	a credit counseli	ng briefing beca	use of: [Check	the applicable
statement.] [Must	be accompanied by a	motion for determ	nination by the c	court.]	

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Best Case Bankruptcy

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental
deficiency so as to be incapable of realizing and making rational decisions with respect to financial
responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Marilyn Molina

Marilyn Molina

Date: August 21, 2015

requirement of 11 U.S.C. § 109(h) does not apply in this district.

# United States Bankruptcy Court Northern District of Ohio

In re	Marilyn Molina		Case No.	
	<u> </u>	Debtor	_,	
			Chapter	7

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	6,728.84		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		16,023.41	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,162.64
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,299.00
Total Number of Sheets of ALL Schedu	ıles	21			
	To	otal Assets	6,728.84		
			Total Liabilities	16,023.41	

## United States Bankruptcy Court Northern District of Ohio

In re	Marilyn Molina		Case No.		
		Debtor	,		
			Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 12)	2,162.64
Average Expenses (from Schedule J, Line 22)	2,299.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,896.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		16,023.41
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		16,023.41

BOA (Official Form 0A) (12/07	B6A	icial Form 6A) (	(12/07)
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In re	Marilyn Molina	Case No.
-	<u> </u>	Debtor ,

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

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In re	Marilyn Molina	Case No
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## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	cash	-	25.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	prepaid Master Card (wages)	-	75.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	security deposit (Jerrod Biebrick)	-	625.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	household furnishings	-	300.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	books	-	50.00
6.	Wearing apparel.	women's clothes	-	200.00
7.	Furs and jewelry.	jewelry	-	50.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total >	1,325.00
(Total of this page)	

2 continuation sheets attached to the Schedule of Personal Property

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including		wages withheld by emplooyer and not deposited with court	-	501.82
	tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		wages garnished but not distributed by court	-	902.02

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Best Case Bankruptcy

1,403.84

Sub-Total >

(Total of this page)

In re Marilyn Mo	olina
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# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	2	2003 Infinity G35 (140,000 miles)	-	3,500.00
	other vehicles and accessories.	2	2002 Ford Windstar van (160,000 miles)	-	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

4,000.00

Total >

> 6,728.84

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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Marilyn Molina

Case No.

Debtor

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Cash on Hand</u> cash	Ohio Rev. Code Ann. § 2329.66(A)(3)	25.00	25.00
Checking, Savings, or Other Financial Accounts, C	ertificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3)	75.00	75.00
Household Goods and Furnishings household furnishings	Ohio Rev. Code Ann. § 2329.66(A)(4)	300.00	300.00
Wearing Apparel women's clothes	(a) Ohio Rev. Code Ann. § 2329.66(A)(4)	200.00	200.00
Furs and Jewelry jewelry	(a) Ohio Rev. Code Ann. § 2329.66(A)(4)	50.00	50.00
Other Contingent and Unliquidated Claims of Every	(b) / Nature		
wages withheld by emplooyer and not deposited with court	Ohio Rev. Code Ann. § 2329.66(A)(3) Ohio Rev. Code Ann. § 2329.66(A)(18)	350.00 151.82	501.82
wages garnished but not distributed by court	Ohio Rev. Code Ann. § 2329.66(A)(18)	902.02	902.02
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2003 Infinity G35 (140,000 miles)	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,675.00	3,500.00

Total: 5,728.84 5,553.84

•		
In re	Marilyn Molina	Case No
	•	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	COZH	OH-AD-CO-LZC	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Т	T E			
	1			Щ	D	Ш		
			Value \$					
Account No.						П		
	1							
			Value \$					
Account No.	Г			П				
	1							
			Value \$					
Account No.						П		
	1							
			Value \$					
0	_	•	S	ubt	ota	1		
ocontinuation sheets attached			(Total of th	is r	ag	<sub>(e)</sub>		
			`	-	_	t		_
			(Demont on Survey of Sec		ota		0.00	0.00
			(Report on Summary of Sci	nea	uie	:s) [		

In re	Marilyn Molina	Case No.
-		Dobtor
		Debtor

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Marilyn Molina	Case No.	
		ebtor ,	

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

8								
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	CO	Ü	Ţ	5Τ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		ONTINGEN	LIQUI	I I	U T F	AMOUNT OF CLAIM
Account No. 22029146			2014	T	D A T		Ī	
Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260		-	Collection - Physician S Link Cen		E D			467.00
Account No. <b>20757790</b>	┝	H	2013	+	╁	╀	+	401100
Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260		-	Collection - Physician S Link Cen					
								456.00
Account No. 20234361  Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260		-	2013 Collection - Physician S Link Cen					
								426.00
Account No. 22029145  Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260		-	2014 Collection - Physician S Link Cen					303.00
	<u> </u>	<u> </u>	1	l Subt	L tota	1 al	+	
_7 continuation sheets attached			(Total of t				)	1,652.00

In re	Marilyn Molina	Case No.	
_		Debtor	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBT	H W J	CONSIDERATION FOR CLAIM. IF CLAIM	CONT_N	DZLLGD.	1 - C - C - C	AMOUNT OF CLAIM
(See instructions above.) Account No. 21826506	O R	С	IS SUBJECT TO SETOFF, SO STATE.  2014	G E N T	I D A T E D	E D	
Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260		-	Collection - Physician S Link Cen				24.00
Account No. <b>22278406</b>	┞		2015	$\vdash$	H		24.00
CBCS P.O. Box 2589 Columbus, OH 43216		-	collection - Columbia Gas				
							434.79
Account No. 22153276  CBCS P.O. Box 163279  Columbus, OH 43216-3279		-	2015 collection - Mercy CHP Reg. Med. Ctr.				465.27
Account No. D53108160N1  Comnwith Fin 245 Main Street Scranton, PA 18519		-	2009 Collection - Physicians Link				172.00
Account No. UCL1981709  Contract Callers, Inc. 501 Green St 3rd Floor, Ste. 302 Augusta, GA 30901		_	2013 Collection - Ohio Edison				437.00
Sheet no1 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			1,533.06

In re	Marilyn Molina	Case No.
_		Debtor

	С	ни	sband, Wife, Joint, or Community	С	Τπ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE OF A IM WAS INCUDED AND	CONTINGENT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. UCL2066790			2014	Т	E		
Contract Callers, Inc. 501 Green St 3rd Floor, Ste. 302 Augusta, GA 30901		_	Collection - Ohio Edison		D		187.00
Account No. 87634094			2011	T			
Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256		-	Collection - TMobile				
							920.00
Account No. 100377479			2009				
Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256		-	Collection - Time Warner Cable				111.00
Account No. <b>100374514</b>			2010	+			
Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256		-	Collection - Time Warner Cable				
A			2040	_			62.00
Account No. 16248253  First Federal Credit C 24700 Chagrin Blvd Ste 2 Cleveland, OH 44122		_	2012 Collection - Assoc. Of N. Ohio				420.00
						L	420.00
Sheet no. <b>2</b> of <b>7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			1,700.00

In re	Marilyn Molina	Case No.	
-		Debtor	

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	ı	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	GUID			AMOUNT OF CLAIM
Account No. 9890416			2009	Т	A T E D			
Goldkey Cred P O Box 15670 Brooksville, FL 34604		-	Collection - Er Medical S					573.00
Account No. 10648298			2014					
Goldkey Cred P O Box 15670 Brooksville, FL 34604		-	Collection - Er Medical S					402.00
						_		423.00
Account No. 10688359			2014					
Goldkey Cred P O Box 15670 Brooksville, FL 34604		-	Collection - Er Medical S					423.00
Account No. <b>10686796</b>			2013	+	+	+		
Goldkey Cred P O Box 15670 Brooksville, FL 34604		-	Collection - Er Medical S					60.00
Account No. 4117		H	2015	t	t	$\dagger$		
H&R Block Bank P.O. Box 30040 Tampa, FL 33630-3040		_	charge account (CenturyLink, Time Warner)					468.65
Sheet no. <b>3</b> of <b>7</b> sheets attached to Schedule of		_	,	Sub	tot	al		4 047 05
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pa	ge	)	1,947.65

In re	Marilyn Molina	Case No	_
_		Dehtor	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ç	U	Ţ	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QULD	F	I S P U T E D	AMOUNT OF CLAIM
Account No. 27405814			2012	T	E		ſ	
Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116		-	Collection - Emh Regional He		D			804.00
Account No. <b>33671941</b>			2014	Τ	Τ	Γ	Т	
Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116		-	Collection - Community Ho					393,00
	┡			$\downarrow$	$oldsymbol{\perp}$	+	4	
Account No. <b>34603470</b>	ł		2014					
Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116		-	Collection - Uh Elyria Medic					295.00
Account No. <b>32335908</b>	╁		2013	+	+	t	+	
Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116		-	Collection - Uh Elyria Medic					278.00
Account No. <b>33669788</b>	╁		2014	+	+	t	+	
Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116	•	-	Collection - Community Ho					203.00
Sheet no4 of _7 sheets attached to Schedule of	_			Sub	tota	ıl	†	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	paş	ge	) [	1,973.00

In re	Marilyn Molina	Case No.	
-		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	UNL	P	
MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	CONTI	LLQU	IΡ	
AND ACCOUNT NUMBER (See instructions above.)	O R	C 1	IS SUBJECT TO SETOFF, SO STATE.	N G E N	I I	E D	AMOUNT OF CLAIM
Account No. 31521177			2013	] <del>'</del>	ĀTED		
Jprecovery			Collection - Uh Elyria Medic				
20220 Center Ridge #370 Rocky River, OH 44116		-					
Nocky River, 311 44110							
				L			183.00
Account No. 33667398			2014				
Jprecovery			Collection - Community Ho				
20220 Center Ridge #370 Rocky River, OH 44116		-					
Industry inverse on 44110							
							143.00
Account No. 33667399	ł		2014				
Jprecovery			Collection - Community Ho				
20220 Center Ridge #370 Rocky River, OH 44116		-					
licesty through the transfer							
				L			143.00
Account No. 31521176	┨		2013				
Jprecovery			Collection - Uh Elyria Medic				
20220 Center Ridge #370 Rocky River, OH 44116		-					
				ot			108.00
Account No.	┨		2007				
Lance Acceptance Corp.			judgment				
c/o James M. Doran, Esq. Weltman Weinberg & Reis		-					
323 W. Lakeside Ave., Ste. 200							
Cleveland, OH 44113							5,020.56
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of				Subt			5,597.56
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis !	pag	e)	, , , ,

In re	Marilyn Molina	Case No.	
_		Debtor	

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	CO	U N L	D	
MAILING ADDRESS	CODEBT	Н	DATE CLAIM WAS INCURRED AND	Ň	L	SPUTE	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	W	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	U	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	G E N	ıυ	E D	THROUGH OF CERMIN
Account No. 39157057	h		2015	T N	Ā T E		
			collection Community Health Bartners		D		
Medicredit P.O. Box 1629		L	collection - Community Health Partners				
Maryland Heights, MO 63043-0629		ľ					
imal yland Heights, MO 03043-0023							
							219.47
Account No. 740235256			2015				
Mercy Community Reg Med			medical services				
P.O. Box 740738		-					
Cincinnati, OH 45274-0738							
·							
							263.67
Account No. 1403695			2012				
			Collection - Center For O				
Rbc Po Box 1548		_	Conection - Center 1 of C				
Mansfield, OH 44901							
							473.00
Account No. 1403696	T	T	2012				
			Collection - Center For O				
Rbc		L	Collection - Center For O				
Po Box 1548 Mansfield, OH 44901							
111011011011011							
							315.00
Account No. 1403694		Ī	2012				
Dha	1		Collection - Center For O				
Rbc Po Box 1548		_	Concention Content of C				
Mansfield, OH 44901	1						
	1						
							219.00
Sheet no. 6 of 7 sheets attached to Schedule of	_	_		Subt	ota	.1	4.400.44
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,490.14

In re	Marilyn Molina	Case No
•		Debtor

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	CON	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONT - NG EN	QUIDA	D I S P U T E D	AMOUNT OF CLAIM
Account No. 6369920312029565			2015	Ť	T E D		
Webbank/Fingerhut Fres 6250 Ridgewood Rd Saint Cloud, MN 56303		-	Installment Sales Contract		D		130.00
Account No.	┡	-			-		130.00
Account No.							
Account No.	H			H			
Account No.							
Account No.							
Sheet no7 of _7 sheets attached to Schedule of				Subt			130.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis j	pag	ge)	130.00
			(Report on Summary of Sc		ota lule		16,023.41

In re	Marilyn Molina	Case No
_		,
		Debtor

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Jerrod Biebrick 1011 East 34th Street Lorain, OH 44055

residential lease - month-to-month

In re	Marilyn Molina	Case No.	
-		,	
		Debtor	

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to identify your c	ase:							
Deb	otor 1 Marilyn Moli	ina			_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF OHIO						
	se number 		-				ed filing ent showir	ng post-petitio	
0	fficial Form B 6I							following date	
	chedule I: Your Inc	ome			l	MM / DD/ \	YYYY		12/13
sup spo	as complete and accurate as pos- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fili ir spouse is not filing w	ng jointly, and your s ith you, do not includ	pouse le infor	is living wit mation abo	th you, inc ut your sp	lude infor	mation about nore space is	it your needed,
1.	Fill in your employment		Debtor 1			Debtor :	2 or non-f	iling spouse	
	information.  If you have more than one job,		■ Employed			☐ Empl		mig opedes	
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	baker						
	Include part-time, seasonal, or self-employed work.	Employer's name	Apples						
	Occupation may include student or homemaker, if it applies.	Employer's address	816 North Main S Wellington, OH 4						
		How long employed to	here? 8 years						
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any line, wr	ite \$0 in th	e space. Ir	nclude your no	on-filing
-	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	for all	employers fo	or that pers	on on the	lines below. It	f you need
					For De	ebtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,535.00	\$	N/A	
3.	Estimate and list monthly overt	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$ 2,5	535.00	\$	N/A	

Deb	tor 1	Marilyn Molina	-	Case r	number ( <i>if known</i> )			
				For	Debtor 1		Debtor 2 or filing spouse	
	Cop	y line 4 here	4.	\$	2,535.00	\$	N/A	
5.	List	all payroll deductions:						
٥.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	361.53	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$-	0.00	\$-	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	10.83	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	372.36	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,162.64	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8c. 8d.	\$	0.00	\$	N/A N/A	
	8e.	Social Security	8e.	\$ 	0.00	\$	N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	\$	N/A	
	8g.	Pension or retirement income	_ 8g.	\$-	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	· · —	0.00	· · —	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$	-	2,162.64 + \$		N/A = \$ 2,162	2 64
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ					
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depen	•		•		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies					12. <b>\$ 2,16</b> 2	2.64
							Combined monthly inco	me
13.	Do y	you expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?					
		·						

Fill	in this informa	ation to identify yo	our case:							
	tor 1	Marilyn Moli				Ck	nack i	if this is:		
Deb	tor r	warnyn won	па					amended filing		
Deb	tor 2							J	ving post-petition cl	hapter
(Spc	ouse, if filing)				_	_			the following date:	iapto.
Unit	ed States Bankr	uptcy Court for the:	NORTH	IERN DISTRICT OF OHIC	)		M	M / DD / YYYY		
Cas	e number					П	I As	separate filing fo	r Debtor 2 because	Debtor
l	nown)					_		maintains a sepa		
Of	fficial Fo	rm B 6J			· · · · · ·					
		J: Your	Evnon	1505						12/13
Be info nun	as complete a ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry question	. If two married people a ch another sheet to this						ect
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold							
	■ No. Go to	line 2.	in a sonar	ate household?						
			iii a sepai	ate nousenoid:						
	□ N □ Y	-	st file a sep	parate Schedule J.						
2.	Do you have	e dependents?	■ No							
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?	:
	Do not state	the							□ No	-
	dependents'	names.							☐ Yes	
									☐ No	
									☐ Yes	
									□ No	
					-				☐ Yes	
									□ No	
2	De veur evr	anasa insluda	_						☐ Yes	
3.		penses include f people other t	han	No						
	yourself and	d your depende	nts? ⊔	Yes						
Par	t 2: Estim	ate Your Ongoi	na Monthi	lv Expenses						
Est exp	imate your ex	cpenses as of you	our bankrı	uptcy filing date unless y y is filed. If this is a supp						
				government assistance i						
	ficial Form 6I		u nave m	nadea it on Schedule I.	rour income			Your expe	enses	
4.		or home owners		ses for your residence. I	nclude first mortgage	4.	\$_		550.00	
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's	s, or renter	's insurance		4b.			0.00	
	4c. Home	maintenance, re	epair, and ι	upkeep expenses		4c.	\$ -		0.00	
		owner's associat				4d.	_		0.00	
5.	Additional r	nortgage payme	ents for yo	<b>our residence,</b> such as ho	me equity loans	5.	\$		0.00	

Official Form B 6J Schedule J: Your Expenses page 1

Marilyn Molina	Case numb	ber (if known)	
tion:			
	62	\$	250.00
,		·	0.00
		·	50.00
		·	
· · ·		·	0.00
			650.00
		·	0.00
			75.00
•			50.00
•	11.	<b>a</b>	350.00
	12.	\$	250.00
	13.	\$	0.00
	14.	\$	0.00
rance.			
ot include insurance deducted from your pay or included in lines 4 or 20.			
Life insurance	15a.	\$	0.00
Health insurance	15b.	\$	0.00
Vehicle insurance	15c.	\$	74.00
Other insurance. Specify:	15d.	\$	0.00
es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	16.	\$	0.00
• •	17a.	·	0.00
• •	17b.	\$	0.00
	17c.	\$	0.00
· · ·	17d.	\$	0.00
	40	Φ.	0.00
	18.	·	
	40	\$	0.00
<u> </u>		<b>.</b>	
			0.00
		·	0.00
			0.00
			0.00
		·	0.00
		·	0.00
er: Specify:	21.	+\$	0.00
r monthly expenses. Add lines 4 through 21.	22.	\$	2,299.00
, ,		· <del></del>	
	23a.	\$	2,162.64
			2,299.00
Subtract your monthly expenses from your monthly income.			
The result is your monthly net income.	23c.	\$	-136.36
	e	form?	
you expect an increase or decrease in your expenses within the year after yo xample, do you expect to finish paying for your car loan within the year or do you expect your m fication to the terms of your mortgage?			or decrease because of a
	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies Idicare and children's education costs thing, laundry, and dry cleaning sonal care products and services lical and dental expenses asportation. Include gas, maintenance, bus or train fare. not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations urance.  Not include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance. Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Prayments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 6I). er payments of other property Real estate taxes Property expenses not included in lines 4 or 5 of this form or on Sche Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Ir monthly expenses. Add lines 4 through 21. result is your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. Subtract your monthly expenses from line 22 above.	Electricity, heat, natural gas  Electricity, heat, natural gas  Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services  Cither. Specify:  6d. d and housekeeping supplies  dare and children's education costs  thing, laundry, and dry cleaning  sonal care products and services  10.  Ilical and dental expenses  sportation. Include gas, maintenance, bus or train fare.  to tinclude car payments.  retainment, clubs, recreation, newspapers, magazines, and books  ritable contributions and religious donations  rance.  10t include insurance deducted from your pay or included in lines 4 or 20.  Life insurance  15a.  Health insurance  Vehicle insurance.  Secify:  20.  Other insurance. Specify:  21.  Car payments for Vehicle 1  Car payments for Vehicle 2  Other, Specify:  17a.  Car payments for Vehicle 2  Other, Specify:  17b.  Other. Specify:  17c.  To, Other. Specify:  17c.  To, Other. Specify:  17c.  To, Other. Specify:  17c.  To, Other. Specify:  17d.  To payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 6I).  18er payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 6I).  19.  19.  19.  19.  19.  19.  19.  1	tities:  Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: d and housekeeping supplies dcare and children's education costs 8. \$ ching, laundry, and dry cleaning 9. \$ sonal care products and services 10. \$ licial and dental expenses 11. \$ supportation. Include gas, maintenance, bus or train fare. ort include car payments. ertainment, clubs, recreation, newspapers, magazines, and books 13. \$ ritable contributions and religious donations rrance. not include insurance deducted from your pay or included in lines 4 or 20.  Life insurance Health insurance 15a. \$ Life insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.  Chrer insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.  city: 16. \$ allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: 17c. \$ Car payments for Vehicle 2 Other. Specify: 17c. \$ Car payments for Vehicle 2 Other. Specify: 17d. \$ r payments of allmony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule 1, Your Income (Official Form 6i).  18. \$ er payments you make to support others who do not live with you.  city: 19. Property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  Montgages on other property Real estate taxes Property, homeowner's, or renter's insurance Montgages on other property Real estate taxes Property, homeowner's, or renter's insurance Montgages on other property Real estate taxes Property, homeowner's association or condominium dues er: Specify: 17 c. \$ 18. \$ 18. \$ 18. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 20.

# **United States Bankruptcy Court Northern District of Ohio**

In re	Marilyn Molina			Case No.				
			Debtor(s)	Chapter	7			
		ON CONCERNING DEBTOR'S S						
I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.								
Date	August 21, 2015	Signature	/s/ Marilyn Molina Marilyn Molina Debtor					

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

## United States Bankruptcy Court Northern District of Ohio

In re	Marilyn Molina		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$23,197.38	income from Apples YTD 2015
\$28,000.00	income from Apples year 2014
\$28,000.00	income from Apples year 2013

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** 

**SOURCE** 

#### 3. Payments to creditors

#### None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/

**AMOUNT** PAID OR VALUE OF

AMOUNT STILL

NAME AND ADDRESS OF CREDITOR

**TRANSFERS** 

**OWING TRANSFERS** 

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None П

CAPTION OF SUIT

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Lance Acceptance Corp. vs. Marilyn Molina Case No. 2007CVF01461

NATURE OF PROCEEDING collection

COURT OR AGENCY AND LOCATION **Lorain Municipal Court** Lorain County, Ohio

STATUS OR DISPOSITION iudament in favor of

plaintiff

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately 

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

Lance Acceptance Corp. c/o James M. Doran, Esq. Weltman Weinberg & Reis 323 W. Lakeside Ave., Ste. 200 Cleveland, OH 44113 DATE OF SEIZURE

July-August 2015

DESCRIPTION AND VALUE OF PROPERTY wage garnishment - \$1,152.88

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF

DESCRIPTION AND VALUE OF

CASE TITLE & NUMBER ORDER PROPERTY

## 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

4

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

Jeffrey H. Weir II, Esq. 6145 Park Square Dr., Unit 1 Box 2 Lorain, OH 44053

## 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

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Best Case Bankruptcy

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

## 15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 1642 E. 33rd Street Lorain, OH 44055

NAME USED Marilyn Molina DATES OF OCCUPANCY May 2013-present

1333 Nichols Street Lorain, OH 44052

Marilyn Molina

May 2012-May 2013

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL.

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

7

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

Mono h I

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Q

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	August 21, 2015	Signature	/s/ Marilyn Molina
		_	Marilyn Molina
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

## United States Bankruptcy Court Northern District of Ohio

	Northern District of Ol		
In re Marilyn Molina		Case No.	
	Debtor(s)	Chapter	_7
СНАРТЕ	R 7 INDIVIDUAL DEBTOR'S STAT	EMENT OF INTEN	TION
CHAPTE	R / INDIVIDUAL DEBIOR S STAT	EMENT OF INTEN	IIION
	perty of the estate. (Part A must be fully Attach additional pages if necessary.)	completed for <b>EAC</b>	H debt which is secured by
Property No. 1			
1 3			
Creditor's Name: -NONE-	Describe P	roperty Securing Debt	:
Property will be (check one):			
□ Surrendered	☐ Retained		
If retaining the property, I intend to ☐ Redeem the property ☐ Reaffirm the debt	o (check at least one):		
☐ Other. Explain	(for example, avoid lien using	11 U.S.C. § 522(f)).	
Property is (check one):			
☐ Claimed as Exempt	□ Not clain	ned as exempt	
		1	
<b>PART B</b> - Personal property subject Attach additional pages if necessary	t to unexpired leases. (All three columns of l	Part B must be complete	ed for each unexpired lease.
Property No. 1			
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be U.S.C. § 365	e Assumed pursuant to 11 (p)(2):

personal property subject to an unexpired lease.

Date August 21, 2015
Signature /s/ Marilyn Molina
Marilyn Molina
Debtor

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# United States Bankruptcy Court Northern District of Ohio

	In re	e Marilyn Molina		Case No	)	
Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due S 1,225.00  The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is: Debtor Other (specify):  The variety of the approximation of the debtor of the above-disclosed compensation with any other person unless they are members and associates of my law firm or opy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions on yother adversary proceeding.  CERTIFICATION  Lecrify that the foregoing is a complete statement			Debtor(s)	Chapter	7	
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■ Debtor					1,225.00	
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this bankruptcy proceeding.  Dated: August 21, 2015    S   Jeffrey H. Weir II   (#0067470)   Jeffrey H. Weir II, Esq.   6145 Park Square Dr., Unit 1 - Box 2			CERTIFICATION			
Jeffrey H. Weir II (#0067470)  Jeffrey H. Weir II, Esq. 6145 Park Square Dr., Unit 1 - Box 2			agreement or arrangement for	or payment to me for	representation of the de	ebtor(s) in
Jeffrey H. Weir II, Esq. 6145 Park Square Dr., Unit 1 - Box 2	Dated	d: <b>August 21, 2015</b>				
6145 Park Square Dr., Unit 1 - Box 2						
Lorain, OH 44053			6145 Park Squa	re Dr., Unit 1 - Bo	x 2	
440-988-9013 Fax: 440-334-1936					•	
jeffreyweirlaw@gmail.com						

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court Northern District of Ohio**

In re	Marilyn Molina		Case No.		
		Debtor(s)	Chapter	7	
		N OF NOTICE TO CONSUME		R(S)	

# UNDER § 342(b) OF THE BANKRUPTCY CODE

#### **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Couc.		
Marilyn Molina	X /s/ Marilyn Molina	August 21, 2015
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# United States Bankruptcy Court Northern District of Ohio

In re	Marilyn Molina		Case No.						
	•	Debtor(s)	Chapter 7						
	VERIFICATION OF CREDITOR MATRIX								
The abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and	correct to the best of his/her knowledge.						
Date:	August 21, 2015	/s/ Marilyn Molina							
		Marilyn Molina							
		Signature of Debtor							

Amerifinancial Solutio Po Box 602570 Charlotte, NC 28260

CBCS P.O. Box 2589 Columbus, OH 43216

CBCS P.O. Box 163279 Columbus, OH 43216-3279

Columbia Gas Of Ohio Revenue Recovery 200 Civic Center Dr. Columbus, OH 43215

Community Health Partners 3700 Kolbe Rd. Lorain, OH 44052

Comnwlth Fin 245 Main Street Scranton, PA 18519

Contract Callers, Inc. 501 Green St 3rd Floor, Ste. 302 Augusta, GA 30901

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

First Federal Credit C 24700 Chagrin Blvd Ste 2 Cleveland, OH 44122

Goldkey Cred P O Box 15670 Brooksville, FL 34604

H&R Block Bank P.O. Box 30040 Tampa, FL 33630-3040 Jprecovery 20220 Center Ridge #370 Rocky River, OH 44116

Lance Acceptance Corp. c/o James M. Doran, Esq. Weltman Weinberg & Reis 323 W. Lakeside Ave., Ste. 200 Cleveland, OH 44113

Medicredit P.O. Box 1629 Maryland Heights, MO 63043-0629

Mercy CHP Reg. Med. Ctr. P.O. Box 740819 Cincinnati, OH 45274-0819

Mercy Community Reg Med P.O. Box 740738 Cincinnati, OH 45274-0738

Rbc Po Box 1548 Mansfield, OH 44901

Webbank/Fingerhut Fres 6250 Ridgewood Rd Saint Cloud, MN 56303

Fill	in this information to identify your case:				ne box only a A-1Supp:	s directed in this for	m and in
Deb	otor 1 Marilyn Molina			IIII ZZ	A-Toupp.		
Deb	otor 2			<b>■</b> 1. T	here is no pres	umption of abuse	
(Spo	ouse, if filing)			_	·	o determine if a presu	motion of abuse
Unit	ted States Bankruptcy Court for the: Northern District	of Ohio	'	;	applies will be n	nade under <i>Chapter 7</i> icial Form 22A-2).	
	se number					does not apply now by service but it could a	
				□ Ch	eck if this is a	n amended filing	
Off	ficial Form 22A - 1						
Ch	napter 7 Statement of Your Cu	rrent Mor	nthly Inc	om	е		12/14
spad addi you <i>Pr</i> es	as complete and accurate as possible. If two married ce is needed, attach a separate sheet to this form. In itional pages, write your name and case number (if do not have primarily consumer debts or because a sumption of Abuse Under § 707(b)(2) (Official Form 2) (Calculate Your Current Monthly Income	nclude the line n known). If you b of qualifying mili	umber to whice elieve that you tary service, o	ch the	additional info	ormation applies. On a presumption of ak	the top of any use because
	•						
1.	What is your marital and filing status? Check one o	oniy.					
	Not married. Fill out Column A, lines 2-11.	and bath Oaksan	. A I.D. L'	0.44			
	☐ Married and your spouse is filing with you. Fill o		·	2-11.			
	Married and your spouse is NOT filing with you	-	•				
	☐ Living in the same household and are not leg	gally separated.	Fill out both Co	olumns	A and B, lines	2-11.	
	Living separately or are legally separated. fill penalty of perjury that you and your spouse are living apart for reasons that do not include evac	legally separated	d under nonbar	krupto	y law that appli	es or that you and you	
o in	Fill in the average monthly income that you received case. 11 U.S.C. § 101(10A). For example, if you are filing for your monthly income varied during the 6 months, add income amount more than once. For example, if both spif you have nothing to report for any line, write \$0 in the second case.	g on September the income for all ouses own the sa	15, the 6-montl Il 6 months and	h perio	od would be Mar e the total by 6.	ch 1 through August 3 Fill in the result. Do n	31. If the amount of include any
				Colui Debt		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime all payroll deductions).	, and commissi	ons (before	\$	2,896.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e payments from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	rt. Include regular old, your depende spouse only if Co	r contributions ents, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession						
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or fa	arm \$ 0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property						
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00				_	
	Net monthly income from rental or other real property	\$	Copy here ->	\$	0.00	\$	
7.	Interest, dividends, and royalties			\$	0.00	\$	

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

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Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  3. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  OH  Fill in the number of people in your household.  1 Fill in the median family income for your state and size of household.  4. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is nown Go to Part 3.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of Go to Part 3 and fill out Form 22A-2.  13: Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and Marilyn Molina Signature of Debtor 1  Date August 21, 2015	1 Del	olumn B Ibtor 2 or n-filing spou	se
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse \$  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.  10a. \$ 10b. 10c. Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  2,896.00  12: Determine Whether the Means Test Applies to You  2. Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11.  Copy  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  3. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  OH  Fill in the median family income for your state and size of household.  1. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is r Go to Part 3.  14b.  Check to Part 3.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of Go to Part 3.  15c or Part 3.  14d.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of Go to Part 3.  15c Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and X /s/ Marilyn Molina  Signature of Debtor 1  Date August 21, 2015	0.00 \$		_
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For you spouse \$	\$_		
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.  10a.	\$_		
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Go to Part 3.  Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of</i> Go to Part 3 and fill out Form 22A-2.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and  X /s/ Marilyn Molina  Marilyn Molina  Signature of Debtor 1  Date August 21, 2015			
Go to Part 3 and fill out Form 22A-2.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and  X /s/ Marilyn Molina  Marilyn Molina  Signature of Debtor 1  Date August 21, 2015	is no presumption	n of abuse.	
By signing here, I declare under penalty of perjury that the information on this statement and  X /s/ Marilyn Molina  Marilyn Molina  Signature of Debtor 1  Date August 21, 2015	n of abuse is dete	ermined by Fo	rm 22A-2.
X /s/ Marilyn Molina Marilyn Molina Signature of Debtor 1 Date August 21, 2015			
Marilyn Molina Signature of Debtor 1 Date August 21, 2015	and in any attachm	nents is true a	ind correct.
Signature of Debtor 1  Date August 21, 2015			
Date <b>August 21, 2015</b>			
MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Form 22A-2.			

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

Best Case Bankruptcy